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MESSAGE:

This is regarding Application Serial No. 09/670,971.

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Atty. Dkt. No. 99PS017/KE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Daniel J. Sherlock et al.

Title: SYSTEM AND METHOD FOR
TEST DATA REPORTING
USING A STATUS SIGNAL

Appl. No.: 09/670,971

Filing Date: 09/27/2000

Examiner: Hau H. Nguyen

Art Unit: 2676

<u>CERTIFICATE OF FACSIMILE TRANSMISSION</u>	
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AMENDMENT TRANSMITTAL

Mail Stop NON-FEE AMENDMENT
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, Virginia 22313-1450

Transmitted herewith is an amendment in the above-identified application.

[X] The fee required for additional claims is calculated below:

	Claims As Amended	Previously Paid For	=	Extra Claims Present	x	Rate	=	Additional Claims Fee
Total Claims:	26	-	26	=	0	x	\$18.00	= \$0.00
Independents:	12	-	12	=	0	x	\$86.00	= \$0.00
First presentation of any Multiple Dependent Claims:			+	\$290.00			=	\$0.00
CLAIMS FEE TOTAL							=	\$0.00

001.1586599.1

Application Serial No. 09/670,971

Atty. Dkt. No. 99PS017/KE

[] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input type="checkbox"/> [] Extension for response filed within the first month:	\$110.00	\$0.00
<input type="checkbox"/> [] Extension for response filed within the second month:	\$420.00	\$0.00
<input type="checkbox"/> [] Extension for response filed within the third month:	\$950.00	\$0.00
<input type="checkbox"/> [] Extension for response filed within the fourth month:	\$1,480.00	\$0.00
<input type="checkbox"/> [] Extension for response filed within the fifth month:	\$2,010.00	\$0.00
EXTENSION FEE TOTAL:		
<input type="checkbox"/> [] Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$110.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		
<input type="checkbox"/> [] Small Entity Fees Apply (subtract ½ of above):		\$0.00
TOTAL FEE:		

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 06-1447.

Atty. Dkt. No. 99PS017/KE

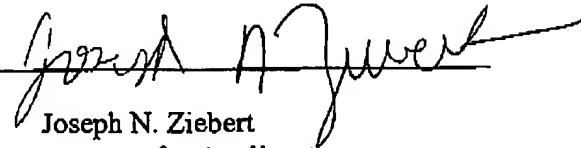
Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date MARCH 3, 2004

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By



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001.1686599.1

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Application Serial No. 09/670,971